EEOC Form 5 (11/09)	Sp. D			
CHARGE OF DISCRIMINATION  This form is affected by the Privacy Act of 1974. See enclosed Privacy Act	Charge Presented To:	Agency(ies) Charge No(s): 471-2023-00674		
Statement and other information before completing this form.	FEPA			
Michigan Department	t Of Civil Rights	and EEOC		
State or local Age				
I Name (indicate Mr., Ms., Mrs., Miss, Ms., Dr., Hon., Rev.)	Home Phone	Year of Birth		
Deniece Anderson	269-267-1415			
Street Address				
P.O. Box 19385				
KALAMAZOO, MI 49019	5/4			
Named is the Employer, Labor Organization, Employment Agency, Apprenticeship Co Against Me or Others. (If more than two, list under PARTICULARS below.)	ommittee, or State or Local Government	Agency That I Believe Discriminated		
Name	No. Employees, Members	Phone No.		
ASCENSION BORGESS HOSPITAL	501+ Employees			
Street Address				
1521 GULL RD				
KALAMAZOO, MI 49048				
Name	No. Employees, Members	Phone No.		
	Loro d			
Street Address City, State	and ZIP Code			
DISCRIMINATION BASED ON	DATE(S) DISCRIMINATION TO	OOK PLACE		
3 (0)	- 4	. 22 4		
D. D.P. Co.	05/16/2022	Latest 09/23/2022		
Race, Religion, Sex	03/10/10/12	- UN EURE		
5.				
per 8	Apprilla Chin China an			
THE PARTICULARS ARE (If additional paper is needed, attach extra sheet(s)): I was hired by the above-named employer on January 24, 2022, as a Certified Pharmacy Technician.				
I informed my employer of my sincerely held religious beliefs and accommodations when I was hired, and the employer agreed to my requests. During my employment I gave birth and required accommodations in order to lactate. I adhered to my 15-minute break schedule in order to express milk, but my employer cited my breaks as excessive on my performance evaluation. Similarly situated Caucasian co-workers, also lactating, were allowed to take breaks, as needed, up to 45 minutes without issue or reprimand. I was denied training and employment opportunities due to my religious beliefs and maternity status. I was told that I could not handle hazardous medications because I was lactating, but not rule or policy existed preventing from performing the duties. Additionally, I was told that I could not participate in training because of my religious beliefs, despite multiple accommodations being available that would not cause the employer an undue hardship.				
I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.	NOTARY - When necessary for State and L	ocal Agency Requirements		
I declare under penalty of perjury that the above is true and correct.	I swear or affirm that I have read the above charge and that it is true to the best of my knowledge, information and belief. SIGNATURE OF COMPLAINANT			
Digitally Signed By: Deniece Anderson	SIGNATURE OF COMPENSIONS			
02/09/2023	SUBSCRIBED AND SWORN T (month, day, year)	O BEFORE ME THIS DATE		
Chamina Barry Structure				

EEOC Form 5 (11	/09
-----------------	-----

V	CHARGE OF DISCRIMINATION	Charge Presented To:	Agency(ies) Charge No(s):	
4	This form is affected by the Privacy Act of 1974. See enclosed Privacy Act Statement and other information before completing this form.	EEOC FEPA	471-2023-00674	
Michigan Department Of Civil Rights		and EEOC		
State or local Agency, if any				

I believe that I was discriminated against due to my Sex (Female), Religion, and Race (Black), in violation of Title VII of the Civil Rights Act of 1964, as amended.

I want this charge filed with both the EEOC and the State or local Agency, if any. I will advise the agencies if I change my address or phone number and I will cooperate fully with them in the processing of my charge in accordance with their procedures.	NOTARY - When necessary for State and Local Agency Requirements	
9(-)	I swear or affirm that I have read the above charge and that it is true to the best	
I declare under penalty of perjury that the above is true and correct.	of my knowledge, information and belief. SIGNATURE OF COMPLAINANT	
Digitally Signed By: Deniece Anderson		
02/09/2023	SUBSCRIBED AND SWORN TO BEFORE ME THIS DATE (month, day, year)	
Charging Party Signature		

CP Enclosure with EEOC Form 5 (11/09)

PRIVACY ACT STATEMENT: Under the Privacy Act of 1974, Pub. Law 93-579, authority to request personal data and its uses are:

- 1. FORM NUMBER/TITLE/DATE. EEOC Form 5, Charge of Discrimination (11/09).
- 2. AUTHORITY. 42 U.S.C. 2000e-5(b), 29 U.S.C. 211, 29 U.S.C. 626, 42 U.S.C. 12117, 42 U.S.C. 2000ff-6.
- 3. PRINCIPAL PURPOSES. The purposes of a charge, taken on this form or otherwise reduced to writing (whether later recorded on this form or not) are, as applicable under the EEOC anti-discrimination statutes (EEOC statutes), to preserve private suit rights under the EEOC statutes, to invoke the EEOC's jurisdiction and, where dual-filing or referral arrangements exist, to begin state or local proceedings.
- 4. ROUTINE USES. This form is used to provide facts that may establish the existence of matters covered by the EEOC statutes (and as applicable, other federal, state or local laws). Information given will be used by staff to guide its mediation and investigation efforts and, as applicable, to determine, conciliate and litigate claims of unlawful discrimination. This form may be presented to or disclosed to other federal, state or local agencies as appropriate or necessary in carrying out EEOC's functions. A copy of this charge will ordinarily be sent to the respondent organization against which the charge is made.
- 5. WHETHER DISCLOSURE IS MANDATORY; EFFECT OF NOT GIVING INFORMATION. Charges must be reduced to writing and should identify the charging and responding parties and the actions or policies complained of. Without a written charge, EEOC will ordinarily not act on the complaint. Charges under Title VII, the ADA or GINA must be sworn to or affirmed (either by using this form or by presenting a notarized statement or unsworn declaration under penalty of perjury); charges under the ADEA should ordinarily be signed. Charges may be clarified or amplified later by amendment. It is not mandatory that this form be used to make a charge.

## NOTICE OF RIGHT TO REQUEST SUBSTANTIAL WEIGHT REVIEW

Charges filed at a state or local Fair Employment Practices Agency (FEPA) that dual-files charges with EEOC will ordinarily be handled first by the FEPA. Some charges filed at EEOC may also be first handled by a FEPA under worksharing agreements. You will be told which agency will handle your charge. When the FEPA is the first to handle the charge, it will notify you of its final resolution of the matter. Then, if you wish EEOC to give Substantial Weight Review to the FEPA's final findings, you must ask us in writing to do so within 15 days of your receipt of its findings. Otherwise, we will ordinarily adopt the FEPA's finding and close our file on the charge.

## NOTICE OF NON-RETALIATION REQUIREMENTS

death in a comme

Please notify EEOC or the state or local agency where you filed your charge if retaliation is taken against you or others who oppose discrimination or cooperate in any investigation or lawsuit concerning this charge. Under Section 704(a) of Title VII, Section 4(d) of the ADEA, Section 503(a) of the ADA and Section 207(f) of GINA, it is unlawful for an employer to discriminate against present or former employees or job applicants, for an employment agency to discriminate against anyone, or for a union to discriminate against its members or membership applicants, because they have opposed any practice made unlawful by the statutes, or because they have made a charge, testified, assisted, or participated in any manner in an investigation, proceeding, or hearing under the laws. The Equal Pay Act has similar provisions and Section 503(b) of the ADA prohibits coercion, intimidation, threats or interference with anyone for exercising or enjoying, or aiding or encouraging others in their exercise or enjoyment of, rights under the Act.